Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN	
FOR			NUMBER FILED		NUMBER EXTRA		Г	RATE	FEE		RATE	FEE	
BASIC FEE					1 4					345.00	OR		690.00
TOTAL CLAIMS 13 n				minus 2	minus 20= *				X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 5 minus 3 =					3 =	*			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	(5-9.V
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY OF			OTHER THAN	
	Maria de la companya	CLAIN		Para Assault		HIGHEST	(Column 3)) . 		
AMENDMENT A		REMAINING AFTER AMENDMENT			NUMBER PREVIOUSL' PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus ***			=		X39=		OR	X78=	
	FIRST PRESE	NIAHON	OF ML	JLTIPLE DEF	'ENL	DENT CLAIM			+130=	,	OR	+260=	-
									TOTAL		OB	TOTAL	
									DDIT. FEE		l	ADDIT. FEE	L
	Section of the Section of the Section of	(Colum		access		Column 2) HIGHEST	(Column 3)		<u> </u>	•			
AMENDMENT B		REMAIN AFTE AMEND	NING ER		PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	05.14	Minus	**		=		X39=		OR	X78=	
	FIRST PRESE	NIAHON	OF MC	JUIPLE DEF	ENL	DENT CLAIM		'	+130=		OR	+260=	
								A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Colum	nn 1)		(0	Column 2)	(Column 3)						
	A CENTRAL	CLAIN	vis	Market Cal		HIGHEST		lr		ADDI-	1		ADDI-
AMENDMENT C		REMAIN AFTE AMENDI	R		PI	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*		Minus	**		=		X\$ 9= ·		OR	X\$18=	
	Independent	*		Minus	**:		=		X39=			X78=	<u> </u>
1	FIRST PRESENTATION OF MULTIPLE DEPENDE					DENT CLAIM		I			OR		ļ
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 2										OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
	The "Highest Num	ber Previo	usly Paid	d For" (Total or	Inde	pendent) is the	e highest numbe	er foun	d in the ap	propriate bo	k in co	lumn 1.	